

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Tennessee

4.22 - Third Party Liability

Citation

- (1) 433.138 Data exchanges between State agencies (single State agency, IVA, IVD and SWICA to identify Medicaid recipients and where possible, absent or custodial parents that are employed, their employer and wage information) are performed during the application or redetermination period and at least on a quarterly basis.
- (d)(1) and
- (d)(3)
- Tapes to initiate data matches are submitted monthly to the IRS for newly approved individuals. The entire caseload is matched against IRS files once a year. An agreement with IRS specifies when the match will be run.
- After individuals are approved for assistance, their SSN is accreted to files sent to SSA for matching against the SSA wage and earnings files. All recipients will be matched at least once, but generally four times, during the year. SSA determines when the matches will be run.
- (d)(4)
- A data match follow up request with the State's Department of Safety accident report files on November 29, 1989 revealed that there is currently no data element by which a match could successfully occur. The motor vehicle accident records are computerized but the only data elements are the date of the accident, a sequentially assigned case number, and an index number established to find the microfiche record. There is no potential for a data match with Medicaid files at this time.
- (e)
- Paid claims with a trauma diagnosis and/or accident/employer related treatment reported by the provider are identified monthly.
- (2) 433.138 The TPL unit receives insurance information from the Department of Human Services who performs the SWICA, SSA wage and benefit, and title IV-A data exchanges and processes the insurance information to the fiscal agent for input into the MMIS. The TPL data are entered within 60 days of initial receipt.
- (g)(1)(i)

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(g)(2)(i)

The TPL unit receives insurance information from the Tennessee Department of Human Services and the Social Security Administration from initial application and redetermination processes for Medicaid eligibility and processes the insurance information to the fiscal agent for input into the MMIS. The TPL data are entered into eligibility file and TPL data base within 60 days of initial receipt.

A data match follow up request with the Worker's Compensation file on November 21, 1989, revealed that the State Worker's Compensation/Industrial Accident Commission files are not computerized at this time. A computerized program is in planning, with a target implementation date of July, 1990. The program will capture individual demographic data, i.e. name, age, sex, SSN, which will be submitted to the Department of Labor on the "First Report of Work Injury" claim form.

(3) 433.138
(d)(4)(ii)

A data match follow up request with State Department of Safety accident report files on November 29, 1989, revealed that there is currently no data element by which a match could occur. The motor vehicle accident records are computerized but the only data elements are the date of the accident, a sequentially assigned case number, and an index number established to find the microfiche record.

(4) 433.138
(e)

The State Agency's MMIS identifies on a monthly basis those paid claims that contain diagnosis codes 800 through 999, (except 994.6 - ICDCM), and accident/employment related treatment reported by the provider for the purpose of determining the legal liability of third parties. An accident questionnaire is system generated and mailed by the fiscal agent to each recipient whose cumulative monthly paid amount equals or exceeds \$500. A certified subrogation notice, as required by State law (T.C.A. 71-5-117-C) is mailed to each identified potential third party. A detailed amount of the State's subrogation claim is provided to the

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4.22 - Third Party Liability

third party upon request, and updated immediately prior to settlement. Should Medicaid's potential recovery be less than the total subrogation interest, the case is referred to the State office of the Attorney General for a compromise determination. Pursuant to TCA 20-13-103, only the Attorney General, with approval of the Governor and the Comptroller, has authority to compromise and settle a debt due the State. Additionally, the right of subrogation by the state to the recipient's right to recovery shall be subject to ordinary and reasonable attorney fees.

The State Agency will identify annually through analysis of dollars recovered those trauma codes that yield the highest third party collections.

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